

## Dependant registration

HCi family membership includes children up to 31 years. Once your children reach 18, you need to keep us informed of their eligibility each year by completing this form and returning it to HCi, PO Box 931, Burnie TAS 7320 or enquiries@hcild.com.au.

### Member details

Name	<input type="text"/>	Member number	<input type="text"/>
Address	<input type="text"/>		
Mobile	<input type="text"/>	Email	<input type="text"/>

### Dependant details

Name	<input type="text"/>	Date of birth	<input type="text" value="dd / mm / yyyy"/>
Mobile	<input type="text"/>	Email	<input type="text"/>
<input type="radio"/>	My dependant is a full time student at <input type="text"/>		
Course commenced	<input type="text" value="dd / mm / yyyy"/>	and is due to be completed at	<input type="text" value="dd / mm / yyyy"/>

Please attach a copy of registration/enrolment details from the educational institution. Note that cover will cease on the course completion date unless you provide additional information.

My dependant is not a full time student but lives with me. I understand that a small additional premium is required in this instance, and I can contact HCi to find out how much.

### Declaration

- I declare that the above dependant is my child and under 31 years of age, and is not married nor living in a de facto relationship.
- I declare that all information provided on this form is accurate to the best of my knowledge and agree to inform HCi if any of these circumstances change.
- I understand that my dependants may be removed from my family membership if I do not register them each year, and that waiting periods may then apply to any claims they make.
- I am the primary member or have the authority to act for the primary member. I have read HCi's Privacy Policy.

Signature	<input type="text"/>	Date	<input type="text" value="dd / mm / yyyy"/>
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